FORM D

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UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D. SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

| OMB AF | PPROVAL |
|-------------------|-----------------|
| OMB Number: | 3235-0076 |
| | August 30, 2008 |
| Estimated averag | |
| hours per respons | se 16.00 |

| SEC USE ONLY | | | | | | |
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| Serial | | | | | | |
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| Name of Offering (check if this is an amendment and name has changed, and indicate of UCP III Co-Investments (F), L.P. – Offering of Limited Partnership Interesting | | |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------|------------------|
| Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Type of Filing: New Filing Amendment | 6 Section 4(6) | ☐ ULOE |
| A. BASIC IDENTIFICATION DA | TA | |
| Enter the information requested about the issuer | | |
| Name of Issuer (check if this is an amendment and name has changed, and indicate of UCP III Co-Investments (F), L.P. | change.) | |
| Address of Executive Offices (Number and Street, City, State, Zip Code) | Telephone Number (Inc | |
| c/o Deutsche Bank (Cayman) Limited, 171 Elgin Avenue, Boundary Hall, Cricket Square, P.O. Box 1984, George Town, Grand Cayman, Cayman Islands KYI-1104 | + 1 345 949 5223 | |
| Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices) Unison Capital Partners, Limited, Kioicho Kelton Bidg. 7F, 4-5 Kioicho, Chiyoda-ku, Tokyo 102-0094 Japan | Telephone Number (Inc. + 81-3-3511-3908 | 08055363 |
| Brief Description of Business: Investment Fund | | |
| Type of Business Organization ☐ corporation ☐ business trust ☐ limited partnership, already formed ☐ other (ple | ease specify): | PROCESSED |
| Month Year | | - PKOCE30ED |
| Actual or Estimated Date of Incorporation or Organization: O 6 0 8 Actual Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbre CN for Canada; FN for other foreign jurisdiction) | viation for State: | 'AUG 2 8 2008 |
| GENERAL INSTRUCTIONS | | THOMSON REUTERS |

GENERAL INSTRUCTIONS

Federal:

C Å

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230,501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date if is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Avenue, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

This notice shall be used to Indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filling of a federal notice.

| A. BASIC IDENTIFICATION DATA | | | | | | | | | |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------|---------------------|----------------|--------------------------------------|--|--|--|--|--|
| Enter the information requested for the following: | | | | | | | | | |
| Each promoter of the issuer, if the issuer has been organized within the past five years; | | | | | | | | | |
| Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; | | | | | | | | | |
| Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and | | | | | | | | | |
| Each general and managing partner of partnership issuers. | | | | | | | | | |
| Check Box(es) that Apply: Prom | | ☐ Executive Officer | Director | ☑ General and/or Managing Partner | | | | | |
| Full Name (Last name first, if individual UCGP III (F), L.P. |) | | | | | | | | |
| Business or Residence Address | (Number and Street, City, State | e, Zip Code) | | | | | | | |
| cio Deutsche Bank (Cayman) Limited, 171 Eigin Avenue, Boundary Hall, Cricket Square, P.O. Box 1984, George Town, Grand Cayman, Cayman Islands KYI-1104 | | | | | | | | | |
| Check Box(es) that Apply: | oter | ☐ Executive Officer | ☐ Director | ☑ General and/or Managing Partner | | | | | |
| Full Name (Last name first, if individual UCGP 2 (F) Ltd. |) | | | | | | | | |
| Business or Residence Address (Number and Street, City, State, Zip Code) c/o Deutsche Bank (Cayman) Limited, 171 Elgin Avenue, Boundary Hall, Cricket Square, P.O. Box 1984, George Town, Grand Cayman, Cayman Islands KYI-1104 | | | | | | | | | |
| Check Box(es) that Apply: | oter | ☐ Executive Officer | ☑ Director | ☐ General and/or Managing Partner | | | | | |
| Full Name (Last name first, if individual) |) | | | | | | | | |
| Andrew Galloway | | | | | | | | | |
| Business or Residence Address | (Number and Street, City, State | a. Zio Code) | · | | | | | | |
| c/o Deutsche Bank (Cayman) Town, Grand Cayman, Cayma | Limited, 171 Elgin Aven | · · · · | Cricket Square | , P.O. Box 1984, George | | | | | |
| Check Box(es) that Apply: Prom | oter | Executive Officer | ☑ Director | General and/or Managing Partner | | | | | |
| Full Name (Last name first, if individual) Ralph Woodford |) | | | | | | | | |
| Business or Residence Address (Number and Street, City, State, Zip Code) c/o Deutsche Bank (Cayman) Limited, 171 Elgin Avenue, Boundary Hall, Cricket Square, P.O. Box 1984, George Town, Grand Cayman, Cayman Islands KYI-1104 | | | | | | | | | |
| Check Box(es) that Apply: | oter | ☐ Executive Officer | ☐ Director | General and/or Managing Partner | | | | | |
| Full Name (Last name first, if individual) | | | | | | | | | |
| Business or Residence Address | (Number and Street, City, State | a, Zip Code) | | | | | | | |
| Check Box(es) that Apply: Prom | oter | Executive Officer | Director | General and/or Managing Partner | | | | | |
| Full Name (Last name first, if individual) |) | | | | | | | | |
| Business or Residence Address | (Number and Street, City, State | , Zip Code) | | | | | | | |

| B. INFORMATION ABOUT OFFERING | | | | | | | | | | | | | | | |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------|-------------|----------------------|--------------------------|------------------------|---------------|------------|------------|---------|---------------|------|-----------|-----|-----------|--------------|
| Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering? | | | | | | | | Yes | No ⊠ | | | | | | |
| | Answer also in Appendix, Column 2, if filing under ULOE. | | | | | | | | _ | | | | | | |
| 2. WI | 2. What is the minimum investment that will be accepted from any individual? | | | | | | | <u>\$</u> | 22.624 | 435 1 | | | | | |
| 3. Do | es the c | offering | permit joir | nt ownersh | ip of a sin | gle unit? | | | •••• | ************* | | | | Yes ⊠ | No □ |
| Does the offering permit joint ownership of a single unit? Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only. N/A | | | | | | | | | | | | | | | |
| Fuil Nar | ne (Las | t name | first, if ind | ividual) | | | | | | | | | | | |
| Busines | s or Re | sidence | Address | (Number a | and Street, | City, State | e, Zip Cod | e) | | | | | | | |
| Name o | Assoc | ated Br | oker or D | ealer | | | • | | | | | | | - | |
| | | | | | d or Intend | | | | | | | | | . 11 | " |
| | | | | | | _ | | | | | | | | All State | S |
| A | | AK] | AZ | AR | CA | CO | CT | DE | DC) | FL | GA | H | (D) | | |
| | | IN | [A] | KS | KY) | | ME | MD | MA | MI | MN | MS | MO | | |
| M | | NE | NV | NH | NJ | NM) | NY | NC] | ND | OH) | OK. | OR) | PA | | |
| RI SC SD TN TX UT VT VA WA WV WI WY Full Name (Last name first, if individual) | | | | | | | | PR | | | | | | | |
| | | | | | and Street, | City State | a. Zip Cod | <u>e</u>) | | | | | | | |
| | | | | | | | | | | | | | | | |
| Name o | T ASSOC | iated Br | oker or D | ealer | | _ | | | | | | | | | |
| | | | | | d or Intend | | | | *** | | • | · | _ | | |
| | | | | | | | | | | | | | | All State | S |
| AL | _ : | AK. | AZ | AR | CA | CO | CT | (DE) | DC. | FL | [GA] | H | | | |
| | _ | <u>IN</u> | IA I | KS] | KY] | | ME | MD | MA) | MI | MN | MS | MO | | |
| M. | | NE SCI | NV NV | TN | (XX) | NM Company | NY NY | NC | ND | OH] | OK) | OR GGZ | PA | | |
| Full Nor | | SC) | SD first, if indi | | <u> [\</u> | UT | VT | VA | WA | WV | [Wi] | WY | PR | | |
| | no (Lasi | , 114211140 | | viduai) | | | | | | | | | | | |
| Busines | s or Res | sidence | Address | (Number a | and Street, | City, State | e, Zip Cod | e) | | | | | | | |
| Name o | f Associ | ated Br | oker or De | ealer | | | | | | | | | | | |
| | | | | as Solicite ndividual | d or Intend States) | ls to Solici | Purchase | er\$ | | | | | | All State | s |
| A |] [| AK | ΑZ | AR | CA | CO | CT | DE | DC | FL | GA | H | ID) | | |
| [H |] [| IN | IA | KS | KY | LA | ME | MD | MA | MI | MN | MS | MO | | |
| M | ם פ | NE | NV | NH | NJ | NM | NY | NC | NO | ОН | OK | OR | PA | | |
| R | <u> </u> | SC | SD | TN | TX | UT | VT | VA | WA | [WV] | WI | WY | PR | | |

Minimum investment may be waived at the discretion of general partner.

The partnership interests are denominated in Yen. The exchange rate between Yen and U.S. dollars is based on the rate as of August 19, 2008.

| | C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND US | E OF PROCEEDS | |
|----|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------|--------------------------------------|
| 1. | Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. | | |
| | Type of Security | Aggregate Offering Price ² | Amount Aiready Sold |
| | Debt | \$ <u>N/A</u> | \$N/A |
| | Equity | \$N/A | \$N/A |
| | ☐ Common ☐ Preferred | | |
| | Convertible Securities (including warrants) | \$ N/A | \$ <u>N/A</u> |
| | Partnership Interests | \$ 2,000,000,000* | \$ <u>67,767,577</u> |
| | Other (Specify) | \$N/A | \$N/A |
| | Total | \$ 2,000,000,000* | \$ <u>.</u> 67,767,577 |
| | Answer also in Appendix, Column 3, if filing under ULOE. | | |
| 2. | Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." | | |
| | | Number Investors | Aggregate Dollar Amount of Purchases |
| | Accredited Investors | 11 | \$ <u>67.767.577</u> |
| | Non-accredited Investors | N/A | \$N/A |
| | Total (for filings under Rule 504 only) | N/A | \$ <u>N/A</u> |
| | Answer also in Appendix, Column 4, if filing under ULOE. | | |
| 3. | If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C —Question 1. | | • • • |
| | Type of Offering | Type of Security | Dollar Amount Sold |
| | Rule 505 | N/A | \$ N/A |
| | Regulation A | N/A | \$ N/A |
| | Rule 504 | | \$N/A |
| | Total | | \$N/A |
| 4. | a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. | | |
| | Transfer Agent's Fees | | \$0 |
| | Printing and Engraving Costs | 🖾 | \$ 4.541* |
| | Legal Fees | 🛛 | \$ 300,000* |
| | Accounting Fees | | \$0 |
| | Engineering Fees | | s 0 |
| | Sales Commissions (specify finders' fees separately) | | \$0 |
| | Other Expenses (identify) Tax Advisory Expenses | | \$25,000* |
| | | | |

329,541*

² Represents the total aggregate offering price of securities offered by the issuer and its affiliates.

| • | b. Enter the difference between the aggregate offering pand total expenses furnished in response to Part C - Que proceeds to the issuer." | | | \$ 1.999.670.459* | | | |
|------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------|-----------------------|-----------------------------|------------------------------------------------|----------------|-----------------------|
| 5. | Indicate below the amount of the adjusted gross proceed each of the purposes shown. If the amount for any purpose the box to the left of the estimate. The total of the paproceeds to the issuer set forth in response to Part C— | ese is not known, furnish an ayments listed must equal | estimate and check | | | | |
| | , | | | Ó Dire | ments to fficers, ectors, & ffiliates | | yments to Others |
| | Salaries and fees | | | □\$_ | N/A | _ 🗆 \$ | N/A |
| | Purchase of real estate | | | □\$_ | N/A | _ 🗆 s | N/A |
| | Purchase, rental or leasing and installation of mack and equipment | hinery | | \$ | N/A | _ 🗆 \$ | N/A |
| | Construction or leasing of plant buildings and facility | ties | | □\$ | N/A | _ 🗆 \$ | N/A |
| | Acquisition of other businesses (including the value offering that may be used in exchange for the asset | its or securities of another | | | NA | | 41/4 |
| | Repayment of indebtedness | | | | | | N/A |
| | Working capital | | | | | | |
| | Other (specify):INVESTMENTS IN SECURITIES | | | □\$ | | | N/A 999.670.459* |
| | Office (specify). INVESTMENTS IN SECONTIES | | | □ ₽ | | _ 618_1. | 999,010,439 |
| | | | | | | | |
| | Cotumn Totals | | | | N/A | ⊠ § 1 . | 999.670.45 <u>9</u> * |
| | Total Payments Listed (column totals added) | | | ∑ <u>\$ 1.999.670.459</u> ° | | | <u>59</u> ° |
| | | D. FEDERAL SIGNATU | JRE. | | | | |
| sign | issuer has duly caused this notice to be signed by the ature constitutes an undertaking by the issuer to furn formation furnished by the issuer to any non-accredited | ish to the U.S. Securities | and Exchange Con | nmission | | | |
| | or (Print or Type) P III Co-Investments (F), L.P. | Stopaturi | | 7 | Date Au | gust2/ | , 2008 |
| Ву | e of Signer (Print or Type) By: UCGP III(F), L.P. eneral Partner | Title of Signer (Print or Ty Director of the Gen | | he Ge | neral Pari | ner of t | he issuer. |
| By: | UCGP2(F) Ltd. eneral Partner | | | | | | |
| Ву | Andrew Galloway | | | | | | |
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| | | ATTENTION | | | · · · · · · · · · · · · · · · · · · · | | |
| | Intentional misstatements or omissions of fact constitute | | (See 18 U.S.C. 1004.) | | | | |
| | The state of the s | TOTAL OF THE PARTY AND AIR PROPERTY. | 1000 10 0.0.0. 1001.) | | | | |